



City of Seattle  
Department of Planning and Development

Mailing Address: 700 Fifth Ave, Suite 2000, PO Box 34019, Seattle, WA 98124-4019  
Phone: (206) 684-8464 Fax: (206) 684-8113  
Website: [www.seattle.gov/dpd](http://www.seattle.gov/dpd) Hours: M,W,F: 7:30-5:30 T,Th: 10:30-5:30

...PERMIT APPLICATION...



Work Site Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Activity Location: \_\_\_\_\_ Apt/Suite: \_\_\_\_\_

Description of Work: \_\_\_\_\_

WORK SITE OWNER/TENANT INFORMATION	CONTRACTOR INFORMATION
<input type="checkbox"/> Owner <input type="checkbox"/> Tenant Name: _____ Phone: (_____) _____ Fax: (_____) _____ Address: _____ Apt/Ste: _____ City/State: _____ Zip: _____	State License #: _____ City of Seattle Bus Lic #: _____ Name: _____ Phone: (_____) _____ Fax: (_____) _____ Address: _____ Apt/Ste: _____ City/State: _____ Zip: _____

*NOTE: All components external to the building must comply with Seattle Noise Ordinances SMC 25.08.410 and 25.08.420. Reference information at: [seattle.gov/dpd/enforcement/Noise\\_Abatement/overview](http://seattle.gov/dpd/enforcement/Noise_Abatement/overview)*

APPLIANCE #1 TYPE:	FUEL TYPE:	
<input type="checkbox"/> Furnace (all types) Replacement <input type="checkbox"/> Fireplace Insert <input type="checkbox"/> Space Heater (all types) <input type="checkbox"/> Stove <input type="checkbox"/> Heat Pump <input type="checkbox"/> Burner	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Propane <input type="checkbox"/> Solid	<input type="checkbox"/> New installation or replacement with fuel change <input type="checkbox"/> Replace appliance with same fuel <input type="checkbox"/> Fuel type conversion Manufacturer: _____ Model #: _____ Heat Output In BTUs: _____ Output in KW (electric only): _____ Furnace/Boiler AFUE: _____

APPLIANCE #2 TYPE:	FUEL TYPE:	
<input type="checkbox"/> Furnace (all types) Replacement <input type="checkbox"/> Fireplace Insert <input type="checkbox"/> Space Heater (all types) <input type="checkbox"/> Stove <input type="checkbox"/> Heat Pump <input type="checkbox"/> Burner	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Propane <input type="checkbox"/> Solid	<input type="checkbox"/> New installation or replacement with fuel change <input type="checkbox"/> Replace appliance with same fuel <input type="checkbox"/> Fuel type conversion Manufacturer: _____ Model #: _____ Heat Output In BTUs: _____ Output in KW (electric only): _____ Furnace/Boiler AFUE: _____

Vent (exhaust) Separate Installation: Quantity: \_\_\_\_\_ ☐ New Vent ☐ Replacement Vent  
(Applies only if venting is not included in a Mechanical and/or Building permit)

I certify that the work to be performed under this application will be done in conformance with the City of Seattle Municipal Code.

Signature: \_\_\_\_\_ Date of Application: \_\_\_\_\_  
Contractor or Owner (or Authorized Agent)

PAYMENT & MAILING INSTRUCTIONS:

- ☐ Pay by Check Mail checks to: DPD, P.O. Box 34234, Seattle, WA 98124-1234  
☐ Charge my escrow (ADA) account # \_\_\_\_\_  
☐ Call me at (\_\_\_\_\_) \_\_\_\_\_ for a credit card number  
 Choose one of the following options: ☐ Mail Permit ☐ Mail & Fax Permit  
☐ Hold Permit for Pick-Up ☐ Mail & Email Permit to: \_\_\_\_\_

DPD USE ONLY:

Permit #: \_\_\_\_\_  
Permit Fee: \_\_\_\_\_